

**UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)**

**Charitta Burt, Paralegal**

U. S. Application No. 10/535680

Publication Date 2/24/05

Publication No. WO 20051017477 PCT/RO/101

Copy of ISR US, Copy of IPER

Assignee information:

Priority Info: Country US No. 60/428099 date 11/21/02 MORE

Correspondence checked: 207 deposit account 23-0804

Inventor Residence city: \_\_\_\_\_, state and/or country \_\_\_\_\_ citizenship: \_\_\_\_\_

International Application No. PCT US2003/037303 Language \_\_\_\_\_

Copy in International Application: ✓; Translation: yes \_\_\_\_\_ no \_\_\_\_\_ Spec.pg no. \_\_\_\_\_

371 Filing Fees: 850; US IPER meets Art. 33(2)-(3) Low fee applies: \_\_\_\_\_

Total Claims: 42 Chargeable 42 Independent 3 multiple \_\_\_\_\_

Number of drawing Sheets: 4 Foreign language: \_\_\_\_\_

Oath/Declaration: ✓ signed        unsigned        defective        completed 11/21/05 Power of Attorney: \_\_\_\_\_

Small entity fee: ✓ SME document yes \_\_\_\_\_ no ✓

Bio Seq. Diskette: \_\_\_\_\_ entered \_\_\_\_\_ Bio Seq. Listing: \_\_\_\_\_ statement \_\_\_\_\_

Article 19 Amendment: \_\_\_\_\_; replaced by Article 34 Amdt. \_\_\_\_\_

Copy ISA References \_\_\_\_\_

Copy of IPER: \_\_\_\_\_; Annexes: \_\_\_\_\_ entered \_\_\_\_\_ not entered \_\_\_\_\_ Text sequence improper \_\_\_\_\_

Preliminary Amendment(s): ✓ date: 11/21/05; 2<sup>nd</sup> amendment date \_\_\_\_\_

IDS: ✓ DATE: 5/19/05 2<sup>nd</sup> DATE \_\_\_\_\_

Request for Immediate Examination: ✓

Substitute Specification: \_\_\_\_\_ date: \_\_\_\_\_

Assignment: \_\_\_\_\_ forwarded to Assignment branch date: \_\_\_\_\_

Priority Document(s): ✓ Number of copies included 1

Date of 35 USC Receipt of Request: 5/19/05 Notes: \_\_\_\_\_

Date Completion USC 371 Requirements: 11/21/05 \*Does not Id the application Corrected 11/21/05

Notice of Missing Requirements: 11/4/05

Notice of Defective Response: \_\_\_\_\_

Notice of Acceptance: 3/9/06

Notice of Abandonment: \_\_\_\_\_ Petition to Revive: \_\_\_\_\_

Other forms: \_\_\_\_\_ Extension of time: Number of months \_\_\_\_\_